FORM D

UNITED STATE 03010354
ECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALES OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

IB NUMBER: 3235-0076
Appires: May 31, 2005
Estimated average burden hours
per response . . . 16.00

SEC US	E ONLY
Prefix	Serial
	[
DATE RE	CEIVED
}	

Name of Offering ( check if this is an ame	ndment and name has chang	ed, and indicate cha	ange.) // (/3 7 5 2
Series A Convertible Preferred Stock			inge.) // 43752
Filing Under (Check box(es) that apply):	Rule 504 ☐ Rule 505	□ Rule 506     □	☐ Section 4(6) ☐ ULOE
Type of Filing: ☐ New Filing ☐ Amendme	ent		
	A. BASIC IDENTIFI	CATION DATA	
1. Enter the information requested about the issu	ıer		
Name of Issuer ( check if this is an amend	ment and name has changed	, and indicate chang	ge.)
CeraTech, Inc.			
Address of Executive Offices	(Number and Street, City,	State, Zip Code)	Telephone Number (Including Area Code)
P.O. Box 1382 Baltimore, MD 21203			(410) 828-5914
Address of Principal Business Operations	(Number and Street, City,	State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)			•
Brief Description of Business			
Development of alternative construction mate	rials.		
Type of Business Organization	_		PROCESSE
□ corporation	limited partnership, alr	eady formed	other (please specify):
business trust	☐ limited partnership, to	be formed	
	Month	Year	( ) JOE 0.0 FREE
Actual or Estimated Date of Incorporation or Or	ganization: 04	2001	☐ Actual ☐ Estimated THOMSON
Jurisdiction of Incorporation or Organization: (I	Enter two-letter U.S. Postal S	Service abbreviation	
(	"N for Canada: EN for other	formion inmindiation	) hori

# **GENERAL INSTRUCTIONS**

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: • Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and · Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter □ Beneficial Owner □ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Robinson, Brenda P. Business or Residence Address (Number and Street, City, State, Zip Code) 2425 Grenoble Road, Richmond, VA 23294 ☐Beneficial Owner ☐Executive Officer Check Box(es) that Apply: ☐ Promoter **⊠**Director ☐General and/or Managing Partner Full Name (Last name first, if individual) Uding, George E. Business or Residence Address (Number and Street, City, State, Zip Code) 110 Broad Avenue, South Naples, FL 34102 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ General and/or □ Director Managing Partner Full Name (Last name first, if individual) Riley, Michael Business or Residence Address (Number and Street, City, State, Zip Code) 2425 Grenoble Road, Richmond, VA 23294 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ General and/or Managing Partner Full Name (Last name first, if individual) Environmental Solutions, Inc. (Number and Street, City, State, Zip Code) Business or Residence Address 2425 Grenoble Road, Richmond, VA 23294 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐General and/or ☐ Director Managing Partner Full Name (Last name first, if individual) The Abell Foundation, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 111 S. Calvert Street, Suite 2300, Baltimore, MD 21202-6174 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐General and/or Managing Partner Full Name (Last name first, if individual) Settle, David G. Business or Residence Address (Number and Street, City, State, Zip Code) 2425 Grenoble Road, Richmond, VA 23294 Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) George and Rosemarie Uding JTWROS Business or Residence Address (Number and Street, City, State, Zip Code) 110 Broad Avenue, South Naples, FL 34102 (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: • Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and · Each general and managing partner of partnership issuers. Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Kamanitz, Larry Business or Residence Address (Number and Street, City, State, Zip Code) c/o The Abell Foundation, Inc., 111 S. Calvert Street, Suite 2300, Baltimore, MD 21202 Check Box(es) that Apply: ☐ Promoter ☐Beneficial Owner ☐Executive Officer Director ☐General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ General and/or Check Box(es) that Apply: □ Director Managing Partner Full Name (Last name first, if individual) (Number and Street, City, State, Zip Code) Business or Residence Address ☐ Beneficial Owner ☐ Executive Officer ☐General and/or Check Box(es) that Apply: ☐ Promoter ☐ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					В.	INFOR	MATION	ABOUT	OFFERI	NG					
1.	Has the	issuer sol	d. or does	the issuer	intend to	sell, to no	n-accredit	ed investo	rs in this c	offering?				Yes	No ⊠
1.	mas the	133461 301	u, or uocs					2, if filing		_	***************************************	***************************************			
2.	What is	the minin	num inves					lividual?						Not app	<u>licable</u>
3.	Does th	e offering	nermit io	int owners	hin of a ci	nale unit?		•••••						Yes ⊠	No
								ill be paid						K-31	
	sion or to be lis name of	similar rented is an a the tracket	nuneration ssociated er or deale	n for solic person or	tation of pagent of a than five	ourchasers broker or (5) persor	in connect dealer reg as to be lis	etion with gistered wi ted are ass	sales of se th the SEC	curities in Cand/or w	the offeri ith a state	ng. If a pe or states,	erson list the		
Full N	lame (La	ist name f	irst, if ind	ividual)											
Busin	ess or R	esidence /	Address	(Number	and Stree	t, City, Sta	ate, Zip Co	ode)							
Name	of Asso	ciated Bro	oker or De	aler	i i			-							
States	in Whi	ch Person	Listed Ha	s Solicited	or Intend	s to Solici	t Purchase	ers						<u>.</u>	
	(Check	"All State	s" or chec	k individu	al States)			•	••••••					☐ All :	States
	[AL ] [IL ]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO ] [LA ]	[CT ] [ME]	[DE] [MD]	[DC ] [MA]	[FL ] [MI ]	[GA ] [MN]	[HI ] [MS ]	[ID ] [MO]		
	[MT] [RI]	[NE]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA]		
			irst, if ind		[]	[]	£ J	[ , , , , ]		F		[]	[ ]		
	·		·	,											
Busin	ess or R	esidence A	Address	(Number	and Stree	t, City, Sta	ate, Zip Co	ode)							
Name	of Asso	ciated Br	oker or De	ealer				_							
States	in Whi	ch Person	Listed Ha	s Solicited	l or Intend	le to Solici	t Purchase								
								,						☐ All	States
				[AR]			[CT]				[GA]		[lD ]		
	[IL ] [MT]	[IN ] [NE]	[IA ] [NV]	[KS] [NH]	[KY] [NJ]	[LA ] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI ] [OH ]	[MN] [OK ]	[MS] [OR]	[MO] [PA ]		
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR ]		
Full N	lame (L	ast name f	first, if ind	ividual)											
Busin	ess or R	esidence A	Address	(Number	and Stree	t, City, Sta	ate, Zip Co	ode)							
								=							
Name	of Asso	ciated Br	oker or De	ealer											
States	in Whi	ch Person	Listed Ha	s Solicited	l or Intend	ls to Solici	it Purchase	ers							
	(Check	"All State	es" or chec	k individu	nal States)			••••••						☐ All	States
	[AL] [IL] [MT] [RI]	[AK] [IN ] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT ] [ME] [NY] [VT]	[DE ] [MD] [NC ] [VA ]	[DC] [MA] [ND] [WA]	[FL ] [MI ] [OH] [WV]	[GA ] [MN] [OK ] [WI ]	[HI] [MS] [OR] [WY]	[ID ] [MO] [PA ] [PR ]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND	US	E OF PROCEED	S		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price		4	Amount Already Sold
	Debt	\$	0	9	\$	50.2
	Equity	\$	2,650,007.25	9	\$	2,650,007.25
	☐ Common ☐ Preferred				-	
	Convertible Securities (including warrants)	\$	1,199,979.00	9	\$	1,199,979.00
	Partnership Interests.	\$ .		9	\$ -	
	Other (Specify:)	\$		9	° -	
	Total	\$	3,849,986.25	9	\$	3,849,986.25
	Answer also in Appendix, Column 3, if filing under ULOE.				-	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					Aggregate
			Number Investors	1		Dollar Amount of Purchases
	Accredited Investors		15		\$_	3,849,986.25
	Non-accredited Investors		0		\$_	(
	Total (for filings under Rule 504 only)				\$_	
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.					
	Type of Offering		Type of Security			Dollar Amount Sold
	Rule 505		Security	:	\$	Sola
	Regulation A			:	\$ -	
	Rule 504			:	<b>\$</b> -	
	Total	_	*	:	\$ -	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			_	_	44.146.47
	Transfer Agent's Fees				-	
	Printing and Engraving Costs		_	_	\$ _	
	Legal Fees				\$ _	50,000
	Accounting Fees				\$ _	
	Engineering Fees	••••	[		\$ .	
	Sales Commissions (specify finders' fees separately)		[		\$ _	
	Other Expenses (identify)		·		\$	

50,000

	C. OFFERING PRICE, N	UMBER OF INVESTORS, EXPENSES A	ND US	E OF PROCEEI	)S	
	b. Enter the difference between the aggrega Part C - Question 1 and total expenses furnis This difference is the "adjusted gross procee	hed in response to Part C - Question 4.a.			\$ <u>       3</u>	3,799,986.25
5.	Indicate below the amount of the adjusted gr to be used for each of the purposes shown. I furnish an estimate and check the box to the ments listed must equal the adjusted gross pr Part C - Question 4.b above.	f the amount for any purpose is not known, left of the estimate. The total of the pay-				
				yments to		
				Officers, rectors, &	F	ayments To
			A	Affiliates	•	Others
	Salaries and fees		□\$		□\$	
	Purchase of real estate		□\$		□ \$ <sup>-</sup>	
	Purchase, rental or leasing and installation of	f machinery and equipment	□\$		<b></b>	
	Construction or leasing of plant buildings an	d facilities	□\$		□\$	
	Acquisition of other businesses (including th		-		-	
	offering that may be used in exchange for the pursuant to a merger)		□\$		□ \$	
	Repayment of indebtedness		-	500,000	□ \$ <sup>-</sup>	
	Working capital			300,000	□ \$ - ⊠ \$ -	3,299,986.25
	Other (specify):		□ \$	<del></del>		3,277,700.25
	Outa (specify).				L 4	
			_		_	
			□\$		□ \$	
	Column Totals		⊠\$	500,000	⊠ \$ ¯	3,299,986.25
	Total Payments Listed (column totals added)	)	-	⊠ \$3,7	99,986.25	
<u> </u>		D. FEDERAL SIGNATURE				
signat	suer has duly caused this notice to be signed bure constitutes an undertaking by the issuer to any non-accretion furnished by the issuer to any non-accretion.	furnish to the U.S. Securities and Exchange	Commis	sion, upon writter		
	(Print or Type)	Signature		Da	ate /	
Cera'	Tech, Inc.				ate [/24/0	3
Name	of Signer (Print or Type)	Title of Signer (Print or Type)		<del></del>	<del>/ / -</del>	
	ael Riley	Chief Executive Officer				
			·			
		,				

ATTENTION
Intentional misstatements or omissions of fact constitute receral criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262	2 presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠
	•	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertake (17 CFR 239.500) at such times as requir	es to furnish to any state administrator of any state in which this notice is filed, a notice red by state law.	on Forr	n D
3.	The undersigned issuer hereby undertake offerees.	es to furnish to the state administrators, upon written request, information furnished by	the issue	≥r to
4.		e issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform in which this notice is filed and understands that the issuer claiming the availability of these conditions have been satisfied.		
	issuer has read this notification and knows authorized person.	the contents to be true and has duly caused this notice to be signed on its behalf by the	unders	igned
	er (Print or Type) raTech, Inc.	Signature   Date   C/24/03		
Nan	ne (Print or Type)	Title (Print or Type)		
Mic	chael Riley	Chief Executive Officer		

# Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	4144 <u> </u>	E. STATE SIGNATURE		_
1.	Is any party described in 17 CFR	230.262 presently subject to any of the disqualifica	tion provisions of such rule? Yes	No ⊠
		See Appendix, Column 5, for state respons	e.	
2.	The undersigned issuer hereby un (17 CFR 239.500) at such times a	ndertakes to furnish to any state administrator of any as required by state law.	state in which this notice is filed, a notice on Fo	rm D
3.	The undersigned issuer hereby un offerees.	ndertakes to furnish to the state administrators, upon	written request, information furnished by the iss	uer to
4.	Offering Exemption (ULOE) of t	s that the issuer is familiar with the conditions that r he state in which this notice is filed and understands g that these conditions have been satisfied.		
	issuer has read this notification and authorized person.	knows the contents to be true and has duly caused	this notice to be signed on its behalf by the under	rsigned
Issu	er (Print or Type)	Signature	Date	
Cer	aTech, Inc.			
Nan	ne (Print or Type)	Title (Print or Type)		
Mic	chael Rilev	Chief Executive Officer		

# Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

· · · · · · · · · · · · · · · · · · ·	Y		T	A	PPENDIX	· · · · · · · · · · · · · · · · · · ·				
1	non-ac	to sell to ccredited rs in State B-Item 1)	Type of security and aggregate offering price offered in State (Part C-Item 1)	Туре	of investor and a	4 mount purchased in C-Item 2)	n State	5 Disqualification under State ULC (if yes, attach explanation of waiver granted (Part E-Item 1)		
State	Yes	No	Series A Con- vertible Pre- ferred Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL				-						
AK							· · ·			
AZ								,		
AR						-				
CA										
СО										
CT										
DE										
DC										
FL		X	\$499,999.50	2	\$499,999.50	0	0		X	
GA										
HI										
ID										
IL										
IN										
IA							·			
KS		<b>-</b>					<u> </u>			
KY		-					<del></del>			
LA										
ME										
MD		X	\$1,727,475.75	7	\$1,727,475.75	0	0		X	
MA										
MI	-									
MN										
MS								<u> </u>		
МО										
MT					<u></u>					

1	<u> </u>	2	1	AI	TENDIA	4		<u> </u>	5
1	non-ac	to sell to ecredited rs in State 3-Item 1)	(Part C-Item 1)	Туре о	Type of investor and amount purchased in State (Part C-Item 2)				olification ate ULOE, attach attion of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
NE									
NV						1			
NH									
NJ									
NM									
NY							-		
NC									
ND						,			
ОН									
OK									
OR									
PA									
RI									
SC									
SD									
TN									
TX									
UT					Mary				
VT							-1419-1		
VA		X	\$422,532	5	\$422,532	0	0		X
WA									
WV									
WI									
WY									
PR									

	in a contract of the contract	aring Programa Programa		Á	PPENDIX	Hall Andrews Comment of the Comment			
1	Intend non-ac	to sell to ecredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in State (Part C-Item 1)	te ce ce tree tree tree tree tree tree t				under St (if yes explan waiver	5 lification ate ULOE , attach ation of granted) C-Item 1)
State	Yes	No	Warrants to Pur- chase Series A Convertible Pre- ferred Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
СО									
CT									
DE					·				
DC									
FL									
GA						,			
HI									
ID									
IL									
IN									
ΙA									
KS									
KY									
LA									
ME									
MD		X	\$1,199,979	1	\$1,199,979	0	0		X
MA									
MI									
MN									
MS									
MO									

1		2	3		PPENDIX	4			5
Intend to sell to non-accredited investors in State			Type of security and aggregate offering price offered in State (Part C-Item 1)	Туре	of investor and (Par	amount purchased in t C-Item 2)	n State	Disqual under St (if yes explan waiver	ification ate ULOE , attach ation of granted) -Item 1)
State	Yes	No	Warrants to Pur- chase Series A Convertible Pre- ferred Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MT									
NE						,			
NV									
NH									
NJ									
NM									
NY									
NC						, ,		,	
ND									
ОН									
OK									
OR							·		
PA									
RI									
SC									
SD									
TN									
TX									
UT									
VT									
VA		-							
WA									
WV									
WI									
WY									
PR					<del></del> -				